PTO/SB/05 (08-03)

Approved for use through 07/31/2006. OMB 0651-0032
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## UTILITY **PATENT APPLICATION TRANSMITTAL**

(Only for new nonprovisional applications under 37 C.F.R. 1.53(b))

Attorney Docket No.	043629.002
First Inventor	BAERWALDE
Title	Device for Therapeutic Treatment of Foot, Heel and/or Like Pain
Express Mail Label No.	EV327362806US

	<del></del>								
	APPLICATION E	LEMENTS	3	1		<u> </u>	Patent Application ioner for Patents		
See MPEP chapter 600 concerning utility patent application contents.			ADDRESS TO: Commissioner for Patents P.O. Box 1450						
See MPEP (	chapter 800 concerning utility pater	ontents.	Alexandria VA 22313-1450						
	Fee Transmittal Form (e.g., PTO/SB/17)				7. CD-ROM or CD-R in duplicate, large table or				
. —	(Submit an original and a duplicate for fee processing)				Computer Program (Appendix)				
	Applicant claims small entity status.				Nucleotide and/or Amino Acid Sequence Submission				
	See 37 CFR 1.27.			· <u></u>	.*	necessary)			
		(Total Pages	[الللا			Readable Forn			
	preferred arrangement set forth be Descriptive title of the Invention	now)				Sequence Listin			
	Cross Reference to Related Appli	cations		i. ☐ CD-ROM or CD-R (2 copies); or ii. ☐ Paper					
	Statement Regarding Fed sponso				c. Statements verifying identity of above copies				
	Reference to sequence listing, a to or a computer program listing app			<u> </u>			LICATIONS PARTS		
	Background of the Invention	CIIGIX			ACCOM	PANTING APP	LICATIONS PARTS		
	Brief Summary of the Invention			9. 🔲	Assignme	nt Papers (cov	ver sheet & document(s))		
	Brief Description of the Drawings	( if filed)		10.	37 C.F.R.	3.73(b) Staten	nent Power of		
	Detailed Description Claim(s)				(when the	re is an assign	ee) Attorney		
	Abstract of the Disclosure			<b>1</b> 11. □	English T	ranclation Doc	ument (if applicable)		
l _				1 ''' 🗀	Linguisti II	ansiation DOC	ument (ii applicable)		
4. 🛛 D	Prawing(s) (35 U.S.C.113)	[Total Sheets	s 4 ]	12.	Informatio	n Disclosure	Copies of IDS		
5 Oath or I	Declaration	Total Sheets	2		Statemen	t (IDS)/PTO-14	49 Citations		
_	•	•	ر السيار	13. 🔲	Prelimina	ry Amendment			
_	Newly executed (original or o			14. 🛛	Return Re	ceipt Postcard	(MPEP 503)		
b. ⊔	Copy from a prior application	,	,			e specifically it			
	(for a continuation/divisional	with Box 18 o	completed)	15. 🗌	•	Copy of Priority	•		
i. [	DELETION OF INVENTO				(if foreign priority is claimed)				
	Signed statement attached delet		ı	16. 🔲	Nonpublic	ation Request	under 35 U.S.C. 122		
1	named in the prior application, s 1.63(d)(2) and 1.33(b).	ee 37 CFR		(b)(2)(B)(i). Applicant must attach form PTO/SB/35					
1 —			1 _	or its equivalent.					
6. Application Data Sheet. See 37 CFR 1.76				17. 🛛	Other: \$38	35 Check & Re	turn Receipt Postcard		
L				1					
18. If a CON	ITINUING APPLICATION, check a	appropriate bo	x, and supply	the requisi	te informatio	n below and in a	a preliminary amendment,		
or in an App	olication Data Sheet under 37 Ci	FR 1.76:							
☐ Conti	inuation 🔲 Divisional	☐ Conti	nuation-in-part	(CIP)	of p	rior application N	o:/		
		niner				Jnit:			
For CONTINI	UATION or DIVISIONAL APPS only	: The entire dis	closure of the	prior applica	ation, from wh	ich an oath or d	eclaration is supplied under Box 5b, erence. The incorporation can only		
be relied upo	on when a portion has been inadve	ertently omitted	from the subr	nitted applic	ation parts.	orporated by res	erence. The incorporation can only		
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Custon	ner Number		254	61		OR 🗆 C	orrespondence address below		
						<u> </u>			
Name	Herbert M. Hanegan								
Address									
Address									
City									
l City	City State Zip Code								
Country	ntry			(404) 815-	3664		(404) 685-6964		
Telephone				(.5., 0.0-		Fax			
Name (Print	/Type) Herbert M. Hand	egan	F	Registration N	lo. (Attorney/	Agent)	25,682		
Signature	A O.	- FAT	16		<del></del>	Date	10/15/03		

This collection of information is required by 37 CFR 1.53(b). The information is regarded to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Mail Stop Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

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	1	for	FY	20	04		

Effective 10/01/2003. Patent fees are subject to annual revision.

Applicant claims small entity status. See 37 CFR 1.27

<b>TOTAL</b>	<b>AMOU</b>	NT OF	PAYMENT
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(\$) 385

	Complete if Known	
Application Number	ТВА	
Filing Date	Concurrent Herewith	
First Named Inventor	BAERWALDE	
Examiner Name	ТВА	· · · · · · · · · · · · · · · · · · ·
Art Unit	ТВА	
Attorney Docket No.	043629.002	

METHOD OF PAYMENT (check all that apply)		FEE CALCULATION (continued)					
		3. ADDITIONAL FEES					
☐ Check ☐ Credit card ☐ Money ☐ Other ☐ None Order	,	Entity	Small I				
Deposit Account:	Large	Enuty	Small	Entity			
Deposit	Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description	Fee Paid	
Account	1051	130	2051	65	Surcharge - late filing fee or oath		
Number	1052	50	2052	25	Surcharge - late provisional filing fee or cover sheet.		
Deposit	1053	130	1053	130	Non-English specification		
Account Name	1812	2,520	1812	2,520	For filing a request for reexamination		
The Director is authorized to: (check all that apply)	1804	920*	1804	920*	Requesting publication of SIR prior to Examiner action		
☐ Charge fee(s) indicated below ☐ Credit any overpayments ☐ Charge any additional fee(s) during the pendency of this application	1805	1,840*	1805	1,840*	Requesting publication of SIR after Examiner action		
Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.	1251	110	2251	55	Extension for reply within first month		
FEE CALCULATION	1252	420	2252	210	Extension for reply within second month		
1. BASIC FILING FEE	1253	950	2253	475	Extension for reply within third month		
Large Entity Small Entity	1254	1,480	2254	740	Extension for reply within fourth month		
Fee Fee Fee Fee <u>Fee Description</u> Code (\$) Code (\$) Fee Paid	1255	2,010	2255	1,005	Extension for reply within fifth month		
1001 770 2001 385 Utility filing fee 385	1401	330	2401	165	Notice of Appeal		
1002 340 2002 170 Design filing fee	1402	330	2402	165	Filing a brief in support of an appeal		
1003 530 2003 265 Plant filing fee	1403	290	2403	145	Request for oral hearing		
1004 770 2004 385 Reissue filing fee	1451	1,510	1451	1,510	Petition to institute a public use proceeding		
1005 160 2005 80 Provisional filling fee	1452	110	2452	55	Petition to revive – unavoidable		
SUBTOTAL (1) (\$) 385	1453	1,330	2453	665	Petition to revive – unintentional		
	1501	1,330	2501	665	Utility issue fee (or reissue)		
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE	1502	480	2502	240	Design issue fee		
Extra Fee from Fee Claims below Paid	1503	640	2503	320	Plant issue fee		
Total Claims -20 ** = 0 X = 0	1460	130	1460	130	Petitions to the Commissioner		
Independent	1807	50	1807	50	Processing fee under 37 CFR 1.17 (q)		
-3 ** = 0 X = 0	1806	180	1806	180	Submission of Information Disclosure Stmt		
Multiple Dependent  Large Entity   Small Entity	8021	40	8021	40	Recording each patent assignment per property (times number of properties)		
Fee Fee Fee Fee	1809	770	2809	385	Filing a submission after final rejection		
Code (\$) Code (\$) Fee Description	1				(37 CFR § 1.129(a))		
1202 18 2202 9 Claims in excess of 20	1810	770	2810	385	For each additional invention to be		
1201 86 2201 43 Independent claims in excess of 3					examined (37 CFR § 1.129(b))		
1203 290 2203 145 Multiple dependent claim, if not paid	1801	770	2801	385	Request for Continued Examination (RCE)		
1204 86 2204 43 ** Reissue independent claims over original patent	1802	900	1802	900	Request for expedited examination of a design application		
1205 18 2205 9 ** Reissue claims in excess of 20 an over original patent	1	Other fee (specify)					
SUBTOTAL (2) (\$) 0							
	*Redu	*Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$) 0					
**or number previously paid, if greater, For Reissues, see above							

SUBMITTED BY Complete (if applicable) Registration No. (Attorney/Agent) Name (Print/Type) Herbert M. Hanegan 25,682 Telephone (404) 815-3664 Signature 10/15/03

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